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ABSTRACT

Advance placement policies are identified in this booklet designed to aid persons who are potentially qualified by prior training or experience for advance placement in programs leading to graduation in nursing or practical nursing. The information was gathered from all 82 programs approved by the state board for 1975. The trend toward improving educational opportunities for experienced students with a minimum loss of time and effort is found to be gaining momentum. Methods include: credit without examination for previous experience in a formal educational program, credit by written examination for theoretical nursing courses, credit by practical examination for clinical courses, credit by transfer, and credit by passing standardized or departmental examinations. Specific data are tabulated for nursing programs leading to certificates, associate degrees, diplomas, and baccalaureate degrees with regard to admissions policies and credit policies for nursing. (LBH)

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ADVANCE PLACEMENT POLICIES OF NURSING EDUCATION IN NORTH CAROLINA

JUNE 1975

PUBLISHED BY

THE STATE BOARD OF EDUCATION AND
THE UNIVERSITY OF NORTH CAROLINA
GENERAL ADMINISTRATION

Address inquiries concerning Advance Placement Policies of Nursing

INTRODUCTION

Purpose

The purpose of this booklet is to identify the advance placement policies of nursing education programs approved by the North Carolina Board of Nursing. It is designed to aid persons who are potentially qualified by prior training or experience for advance placement in programs leading to graduation in nursing or practical nursing.¹ The information was gathered from all 82 programs approved by the Board for 1975.

Background

On September 18, 1974 representatives of the nine institutions specified in House Bill 1470 met in the General Administration building of The University of North Carolina to plan for the use of the \$15,000 appropriated by the 1974 Legislature. Those present were Howard Boudreau (President, Fayetteville Technical Institute), D. W. Colvard (Chancellor, The University of North Carolina at Charlotte), Lucy H. Conant (Dean, School of Nursing, The University of North Carolina at Chapel Hill), James S. Ferguson (Chancellor, The University of North Carolina at Greensboro), Mitzi Holton (Nursing Instructor, Central Piedmont Community College,

¹House Bill 1469

Charlotte), Marinell H. Jernigan (Dean of Nursing, The University of North Carolina at Charlotte), Reginald Koontz (Vice President, Wake Technical Institute, Raleigh), Juanita Long (Chairman, Nursing Department, Western Piedmont Community College, Morganton), and H. F. Robinson (Chancellor Western Carolina University, Cullowhee).

Also present were Raymond H. Dawson (Senior Vice President for Academic Affairs, The University of North Carolina), Vercie M. Eller (Assistant Director of Health Programs, Department of Community Colleges, State Board of Education), Thomas King, Jr. (Controller, Division of Auditing and Accounting, State Board of Education), and R. D. McMillan (Assistant to the President, The University of North Carolina).

The group drafted and presented the following recommendation for consideration to the State Board of Education:

That the expenditure of the \$15,000 provided by House Bill 1470 for the Advance Placement of Nursing be used to develop a publication that would be available to those persons interested in such program, explaining the requirements of each and the steps that must be followed to qualify under the Advance Placement Program at that particular institution. The funds would be expended based on a budget developed in consultation with the Controller of the State Board of Education and only for the purpose of developing a publication for the Advance Placement Program.

The group further recommended the creation of a special committee to develop the publication. Its composition would include the head or designee of the department of nursing of each of the nine institutions and a representative of The University of North Carolina appointed by President William Friday and a representative of the State Department of Community Colleges appointed by President Ben E. Fountain. The committee would be co-chaired by a person from a four-year institution and a person from a two-year institution.

The recommendations of the group of institutional representatives were approved on October 3, 1974 by the State Board of Education. The special committee was subsequently appointed and met on November 12, 1974 to plan its work in developing the publication which would explain the steps students should follow in qualifying for advance placement in nursing education programs in North Carolina. The membership of the special committee is as follows:

Margaret C. Moore, Co-chairperson (Associate Professor,
School of Nursing, The University of North Carolina at
Greensboro)

Mrs. Jessie P. Kiser, Co-chairperson (Chairperson,
Department of Nursing, Central Piedmont Community
College, Charlotte)

Marjorie Baker (Professor and Head, Department of
Nursing, Western Carolina University, Cullowhee)

Mrs. Ruth J. Broadhurst (Assistant Dean and Professor,
School of Nursing, East Carolina University, Greenville)

Dr. John F. Corey (Assistant Vice President, Student Services and Special Programs, The University of North Carolina)

Mrs. Vercie M. Eller (Assistant Director of Health Programs, Department of Community Colleges, State Board of Education)

Dr. Virginia Gover (Director, Undergraduate Program, School of Nursing, The University of North Carolina at Chapel Hill)

Mrs. Juanita W. Long (Chairperson, Nursing Department, Western Piedmont Community College, Morganton)

Mrs. Patricia G. Maul (Assistant Professor of Nursing, The University of North Carolina at Charlotte)

Mrs. Mercedes R. O'Hale (Chairperson, Associate Degree Nursing Department, Fayetteville Technical Institute)

Mrs. Helen Randall (Director, Nursing Education, Wake Technical Institute, Raleigh)

The special committee was assisted by Mrs. Anna Carr of Chapel Hill and Miriam Daughtry of Raleigh. Dr. Jeanne Margaret McNally served as a consultant.

Advance Placement Trend

Faculties of nursing programs use various methods to facilitate the entrance of individuals with advance standing into the 82 nursing programs. This information is usually known only to the specific faculty members involved. Because of this, students seeking recognition of their previous endeavors often expend much time, energy and money in finding nursing education programs that offer opportunity for advance placement.

The trend toward improving educational opportunities for experienced students by enabling them to complete nursing education programs with a minimum loss of time and effort is gaining momentum. Many faculties in North Carolina are experimenting with various methods for granting advance placement. The more common methods are

- 1) Credit without examination for previous experience in a formal educational program,
- 2) Credit by written examination for theoretical nursing courses,
- 3) Credit by practical examination for clinical courses,
- 4) Credit by transfer, and
- 5) Credit by passing standardized or departmental examinations.

Other means of determining advance placement are constantly being considered by faculties for those persons who wish to further their nursing education.

Information in this publication was provided by the heads of the nursing education programs. As trends in general education move to greater recognition of nontraditional experiences, nursing educators will further define and alter their requirements and procedures. Because these policies will vary among programs, persons seeking recognition of their experience and knowledge should write directly to the nursing program of their choice.

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PRACTICAL NURSING PROGRAMS

9 LEADING TO CERTIFICATE

NAME AND LOCATION

ANSON TECHNICAL INSTITUTE
Post Office Box 68
Ansonville, N. C. 28007

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Program

ADMISSIONS POLICIES SOURCE

Institution

Student Affairs Office

*Program**

Pre-entrance Test

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ASHEVILLE BUNCOMBE TECHNICAL INSTITUTE
340 Victoria Road
Asheville, N. C. 28801

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical Exams

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

BLUE RIDGE TECHNICAL INSTITUTE
Flat Rock, N. C. 28731

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Any Person Who Meets Admissions Requirements

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CAPE FEAR TECHNICAL INSTITUTE
411 North Front Street
Wilmington, N. C. 28401

*TITLE OF PERSON TO BE
CONTACTED*

Director, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CARTERET TECHNICAL INSTITUTE
Post Office Box 849
Morehead City, N. C. 28557

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Written Examination

National League for Nursing, Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CATAWBA VALLEY TECHNICAL INSTITUTE
Highway 64-70 Southeast
Hickory, N. C. 28601

*TITLE OF PERSON TO BE
CONTACTED*

Registrar

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests, Medical and Dental Exams

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Comparable Courses

*Eligibility for Special
Examination*

Prior Training and/or Experience

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CENTRAL CAROLINA TECHNICAL INSTITUTE
1105 Kelly Drive
Sanford, N. C. 27330

*TITLE OF PERSON TO BE
CONTACTED*

Director, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

From Other State Accredited Programs

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CENTRAL PIEDMONT COMMUNITY COLLEGE
Post Office Box 4009
Charlotte, N. C. 28204

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Department of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests, Medical, Dental and
Immunization Records

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Previous Education in Nursing Program or
Health Related Fields

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CLEVELAND COUNTY TECHNICAL INSTITUTE
137 South Post Road
Shelby, N. C. 28150

*TITLE OF PERSON TO BE
CONTACTED*

Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Dental and Medical Exams, References, General
Aptitude Test Battery

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

From Other State Accredited Programs

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

COASTAL CAROLINA COMMUNITY COLLEGE
222 Georgetown Road
Jacksonville, N. C. 28540

*TITLE OF PERSON TO BE
CONTACTED*

Supervisor Instructor, Practical Nursing
Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical and Dental Exams, Pre-Admissions Tests,
Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

COLLEGE OF THE ALBEMARLE
Elizabeth City, N. C. 27909

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical Exam, References

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination:*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CRAVEN COMMUNITY COLLEGE
Post Office Box 885
New Bern, N. C. 28560

*TITLE OF PERSON TO BE
CONTACTED*

Director of Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

DURHAM TECHNICAL INSTITUTE
Post Office Drawer 11307
Durham, N. C. 27703

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Nursing Division

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical and Dental Exams, Pre-Admission Tests,
Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Previous Experience, Previous Nursing or Health
Related Courses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

FAYETTEVILLE TECHNICAL INSTITUTE
Post Office Box 5236
Fayetteville, N. C. 28303

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog and Student Handbook

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Previous Nursing Program, Previous Experience
in Nursing

Written Examination

Departmental, National League for Nursing

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

FORSYTH TECHNICAL INSTITUTE
2100 Silas Creek Parkway
Winston-Salem, N. C. 27103

*TITLE OF PERSON TO BE
CONTACTED*

Senior Instructor for Practical Nurse Education

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Individual Basis

Written Examination

If Requested

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

28 30

NAME AND LOCATION

GASTON COLLEGE
Dallas, N. C. 28034

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Nursing Department

ADMISSIONS POLICIES SOURCE

Institution

Catalog, Admissions Office, Nursing Department

*Program**

Pre-Admission Tests

CREDIT POLICIES FOR NURSING

Transfer of Credits

Individual Basis

*Eligibility for Special
Examination*

Licensed Practical Nurses or Extensive Hospital
Experience.

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program; nursing major, or clinical nursing courses.

NAME AND LOCATION

GUILFORD TECHNICAL INSTITUTE
Post Office Box 309
Jamestown, N. C. 27282

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer

ADMISSIONS POLICIES SOURCE

Institution

General Information Handbook

*Program**

Vocational Programs Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Any Student

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

HAYWOOD TECHNICAL INSTITUTE
Post Office Box 457
Clyde, N. C. 28721

*TITLE OF PERSON TO BE
CONTACTED*

Director, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, from Previous Nursing Program,
Individual Basis

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ISOTHERMAL COMMUNITY COLLEGE
Post Office Box 804
Spindale, N. C. 28160

*TITLE OF PERSON TO BE
CONTACTED*

Supervisor/Teacher, Practical Nursing Education

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

JOHNSTON TECHNICAL INSTITUTE
Post Office Box 29
Smithfield, N. C. 27577

*TITLE OF PERSON TO BE
CONTACTED*

Student Personnel

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis from Accredited Program

*Eligibility for Special
Examination*

Medic

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

LENOIR COMMUNITY COLLEGE
Post Office Box 188
Kinston, N. C. 28501

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis for Comparable Courses

*Eligibility for Special
Examination*

In Previous Practical Nursing Education Program

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

MONTGOMERY TECHNICAL INSTITUTE
Post Office Drawer 487
Troy, N. C. 27271

*TITLE OF PERSON TO BE
CONTACTED*

Director, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Individual Basis

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

RANDOLPH TECHNICAL INSTITUTE
Post Office Box 1009
Asheboro, N. C. 27203

*TITLE OF PERSON TO BE
CONTACTED*

Supervisor, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog /

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

RICHMOND TECHNICAL INSTITUTE
Post Office Box 1189
Hamlet, N. C. 28345

*TITLE OF PERSON TO BE
CONTACTED*

Head of Student Personnel

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination.*

Previous Practical Nursing Student Program,
Other Nursing Programs

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ROANOKE-CHOWAN TECHNICAL INSTITUTE
Post Office Box 46-A
Ahoskie, N. C. 27910

*TITLE OF PERSON TO BE
CONTACTED*

Director, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Test, Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Military Trained Medics, Previous Enrollment in
a Practical Nurse or Registered Nurse Program

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ROBESON TECHNICAL INSTITUTE
Post Office Drawer A
Lumberton, N. C. 28358

*TITLE OF PERSON TO BE
CONTACTED*

Student Services, Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Interview, Medical and Dental Exams, Pre-
Entrance Test, References

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Previous Experience, Medic

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ROWAN TECHNICAL INSTITUTE
Post Office Box 1595
Salisbury, N. C. 28144

*TITLE OF PERSON TO BE
CONTACTED*

Supervisor, Practical Nursing Education Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Previous Enrollment in Registered Nurse or
Practical Nursing Education Programs

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SANDHILLS COMMUNITY COLLEGE
Post Office Box 1379
Southern Pines, N. C. 28387

TITLE OF PERSON TO BE
CONTACTED

Health Specialty Counselor

ADMISSIONS POLICIES SOURCE

Institution.

Catalog

*Program**

Special Pamphlet

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis for Comparable Courses

*Eligibility for Special
Examination*

Medic, Previous Experience, Previous Schooling

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SOUTHEASTERN COMMUNITY COLLEGE
Post Office Box 151
Whiteville, N. C. 28472

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SOUTHWESTERN TECHNICAL INSTITUTE
Post Office Box 95
Sylva, N. C. 28779

*TITLE OF PERSON TO BE
CONTACTED*

Supervisor-Teacher, Practical Nursing Education
Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Other State Practical Nursing
Programs

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

STANLY TECHNICAL INSTITUTE
621 Wall Street
Albemarle, N. C. 28001

TITLE OF PERSON TO BE
CONTACTED

Head, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests, Medical Exam, References

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Previous Comparable Courses, Individual Basis

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

TECHNICAL INSTITUTE OF ALAMANCE
411 Camp Road
Burlington, N. C. 27215

*TITLE OF PERSON TO BE
CONTACTED*

Director, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests, High School Diploma or
Equivalency, References, Physical Examination

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Previous Comparable Courses

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

VANCE-GRANVILLE TECHNICAL INSTITUTE
406 Chestnut Street
Henderson, N. C. 27536

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Practical Nursing Education Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Brochure

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Previous Nursing Programs

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WATTS HOSPITAL COURSE IN PRACTICAL NURSING
Post Office Box 168
Durham, N. C. 27705

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Education

ADMISSIONS POLICIES SOURCE

Institution

Watts Hospital Policies

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WAYNE COMMUNITY COLLEGE
Post Office Drawer 1878
Goldsboro, N. C. 27530

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Nursing Department

ADMISSIONS POLICIES SOURCE

Institution

Registrar's Office

*Program**

Pre-Admission Tests

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Previous Nursing Courses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WILKES COMMUNITY COLLEGE
Post Office Drawer 120
Wilkesboro, N. C. 28697

*TITLE OF PERSON TO BE
CONTACTED*

Director, Student Services

ADMISSIONS POLICIES SOURCE

Institution

Student Services Brochure

*Program**

Selection Committee

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Determined by Admissions Committee

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WOMACK ARMY HOSPITAL
Post Office Box 380
Fort Bragg, N. C. 28307

*TITLE OF PERSON TO BE
CONTACTED*

Director, Clinical Specialist Course

ADMISSIONS POLICIES SOURCE

Institution

U.S. Army Recruiter and Medical Department
Course Catalog

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NURSING PROGRAMS WITH OPTION FOR
ONE YEAR PRACTICAL NURSING OR TWO YEAR
ASSOCIATE DEGREE NURSING

NAME AND LOCATION

CALDWELL COMMUNITY COLLEGE
Post Office Box 600
Lenoir, N. C. 28645

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Student Affairs Office

*Program**

Student Affairs Office

CREDIT POLICIES FOR NURSING

Transfer of Credits

New Program

*Eligibility for Special
Examination*

New Program

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

NEWH** REGION L NURSING EDUCATION CONSORTIUM
Post Office Box 2307
Rocky Mount, N. C. 27801

*TITLE OF PERSON TO BE
CONTACTED*

Director, NEWH Region L Consortium

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Licensed Practical Nurses

Written Examination

CLEP, National League for Nursing when Necessary

Performance Evaluation

Practical Demonstration if Necessary

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

**NEWH - Nash Technical Institute, Edgecombe Technical Institute, Wilson Technical Institute, Halifax Technical Institute

NAME AND LOCATION

PITT TECHNICAL INSTITUTE
Post Office Drawer 7007
Greenville, N. C. 27834

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog, Medical and Dental Exams

CREDIT POLICIES FOR NURSING

Transfer of Credits

Individual Basis

*Eligibility for Special
Examination*

Licensed Practical Nurses

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WAKE TECHNICAL INSTITUTE
Route 10, Post Office Box 200
Raleigh, N. C. 27603

*TITLE OF PERSON TO BE
CONTACTED*

Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Catalog and Programs Brochure

*Program**

Catalog and Programs Brochure (Small Program
Primarily Restricted to Wake County Citizens)

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Licensed Practical Nurses, Military, Previous
Work Experience

Written Examination

Departmental, National League for Nursing

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NURSING PROGRAMS LEADING TO
ASSOCIATE DEGREE

NAME AND LOCATION

ASHEVILLE BUNCOMBE TECHNICAL INSTITUTE
340 Victoria Road
Asheville, N. C. 28801

*TITLE OF PERSON TO BE
CONTACTED*

Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Licensed Practical Nurses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

BEAUFORT COUNTY TECHNICAL INSTITUTE
Post Office Box 1069
Washington, N. C. 27889

*TITLE OF PERSON TO BE
CONTACTED*

Nursing Department Chairman

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Dental Exam, Three References, Statement of
Intent, Personal Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, See Nursing Director for Details

*Eligibility for Special
Examination*

Licensed Practical Nurses, Aides, Medics

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CENTRAL PIEDMONT COMMUNITY COLLEGE
Post Office Box 4009
Charlotte, N. C. 28204

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Department of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Licensed Practical Nurses, Previous Education in
Health Related Fields and Nursing Programs

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

COASTAL CAROLINA COMMUNITY COLLEGE
222 Georgetown Road
Jacksonville, N. C. 28540

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical and Dental Exams, Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, From Another Accredited Program

*Eligibility for Special
Examination*

From Other State Accredited Programs,
Licensed Practical Nurses

Written Examination

National League for Nursing, Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

COLLEGE OF THE ALBEMARLE
Riverside Avenue
Elizabeth City, N. C. 27909

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, See Nursing Director for Details

*Eligibility for Special
Examination*

Licensed Practical Nurses, Medical Corpsmen

Written Examination

National League for Nursing

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

CRAVEN COMMUNITY COLLEGE
CARTERET TECHNICAL INSTITUTE
New Bern, N. C. 28560

TITLE OF PERSON TO BE
CONTACTED

Director of Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Physical and Dental Exams, Three References,
Pre-Admissions Tests, Interviews

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

DAVIDSON COUNTY COMMUNITY COLLEGE
Post Office Box 1287
Lexington, N. C. 27292

*TITLE OF PERSON TO BE
CONTACTED*

Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Contact Director of Admissions

*Eligibility for Special
Examination*

Admission to Nursing Program

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

FAYETTEVILLE TECHNICAL INSTITUTE
Post Office Box 5236
Fayetteville, N. C. 28303

*TITLE OF PERSON TO BE
CONTACTED*

Dean, Student Affairs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical and Dental Exams, Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits.

Yes, See Chairman, A.D.N. Program

*Eligibility for Special
Examination*

Licensed Practical Nurses, Medics

Written Examination

National League for Nursing, Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

FORSYTH TECHNICAL INSTITUTE
1990 Beach Street
Winston-Salem, N. C. 27103

*TITLE OF PERSON TO BE
CONTACTED*

Coordinator, Nursing Program

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

GARDNER-WEBB COLLEGE
Department of Nursing
Boiling Springs, N. C. 28017

*TITLE OF PERSON TO BE
CONTACTED*

Director, Department of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog and Nursing School Brochure

*Program**

High School Chemistry Required

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Licensed Practical Nurses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

GASTON COLLEGE
Dallas, N. C. 28034

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Contact Nursing Department

*Program**

Pre-Admission Tests

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Licensed Practical Nurses, Hospital
Experience

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

GUILFORD TECHNICAL INSTITUTE
Post Office Box 309
Jamestown, N. C. 27282

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer

ADMISSIONS POLICIES SOURCE

Institution

Catalog and Brochure

*Program**

Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, If Same Course Content

*Eligibility for Special
Examination*

Licensed Practical Nurses, Medic

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

JAMES SPRUNT INSTITUTE
Post Office Box 398
Kenansville, N. C. 28349

*TITLE OF PERSON TO BE
CONTACTED*

Director of Health Occupations

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ROCKINGHAM COMMUNITY COLLEGE
Wentworth, N. C. 27375

*TITLE OF PERSON TO BE
CONTACTED*

Admissions Officer, Office of Student
Affairs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Contact Chairperson, Department of
Nurse Education

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

ROWAN TECHNICAL INSTITUTE
Post Office Box 1555
Salisbury, N. C. 28144

*TITLE OF PERSON TO BE
CONTACTED*

Chairperson, Department of Health Occupations

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, See Nursing Director for Details

*Eligibility for Special
Examination*

Challenge Courses by Examination

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SAMPSON TECHNICAL INSTITUTE
Post Office Drawer 318
Clinton, N. C. 28328

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits -

Similar Curriculum From Other Nursing Schools

*Eligibility for Special
Examination*

Licensed Practical Nurses with Experience

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SANDHILLS COMMUNITY COLLEGE
Southern Pines, N. C. 28387

*TITLE OF PERSON TO BE
CONTACTED*

Coordinator, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Pre-Admission Tests, Medical and Dental Exams

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, See Nursing Coordinator for Details

*Eligibility for Special
Examination*

Nursing Diploma and Associate Degree Nursing
Programs

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SOUTHEASTERN COMMUNITY COLLEGE
Post Office Box 151
Whiteville, N. C. 28472

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Individual Basis

*Eligibility for Special
Examination*

Licensed Practical Nurses

Written Examination

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

SURRY COMMUNITY COLLEGE
Post Office Box 304
Dobson, N. C. 27017

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, See Director of Nursing Programs for Details

*Eligibility for Special
Examination*

Licensed Practical Nurses, Transfer Students
from other Nursing Schools

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

UNIVERSITY OF NORTH CAROLINA AT WILMINGTON
Post Office Box 3725
Wilmington, N. C. 28401

*TITLE OF PERSON TO BE
CONTACTED*

Director, Associate Degree Program in Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, If Approved by Admission Committee of UNC-W

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WAYNE COMMUNITY COLLEGE
Post Office Drawer 1878
Goldsboro, N. C. 27530

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Nursing Department

ADMISSIONS POLICIES SOURCE

Institution

Registrar's Office

*Program**

Pre-Entrance Tests

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Previous Nursing Courses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WESTERN PIEDMONT COMMUNITY COLLEGE
1001 Burkemont Avenue
Morganton, N. C. 28655

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Programs

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Medical Exams, Interview

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Evaluated Individually

*Eligibility for Special
Examination*

Previous Preparation

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NURSING PROGRAMS
LEADING TO DIPLOMA

NAME AND LOCATION

CABARRUS MEMORIAL HOSPITAL SCHOOL OF NURSING
920 Church Street, North
Concord, N. C. 28025

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Education

ADMISSIONS POLICIES SOURCE

Institution

Catalog, Educational Policies

*Program**

Catalog, Educational Policies

**CREDIT POLICIES FOR NURSING*

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Previous Nursing Courses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

DAVIS HOSPITAL SCHOOL OF NURSING
Post Office Box 1780
Statesville, N. C. 28677

*TITLE OF PERSON TO BE
CONTACTED*

Director

ADMISSIONS POLICIES SOURCE

Institution

School of Nursing

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes; Individual Basis

*Eligibility for Special
Examination*

Previous Nursing Courses Within Last Five Years

Written Examination

Departmental

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

HIGH POINT HOSPITAL SCHOOL OF NURSING
Post Office Box 2086
High Point, N. C. 27261

*TITLE OF PERSON TO BE
CONTACTED*

Nursing Director, School of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Nursing School Brochure

*Program**

Nursing School Brochure

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

LENOIR MEMORIAL HOSPITAL SCHOOL OF NURSING
Post Office Box 1678
Kinston, N. C. 28501

*TITLE OF PERSON TO BE
CONTACTED*

Director, Nursing Education

ADMISSIONS POLICIES SOURCE

Institution

Nursing School Brochure

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

MERCY SCHOOL OF NURSING
1921 Vail Avenue
Charlotte, N. C. 28207

*TITLE OF PERSON TO BE
CONTACTED*

Director

ADMISSIONS POLICIES SOURCE

Institution

School Bulletin

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Previous Education and Experience in Nursing

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

MOUNTAIN SANITARIUM AND HOSPITAL SCHOOL OF NURSING
Fletcher, N. C. 28732

*TITLE OF PERSON TO BE
CONTACTED*

Director, School of Nursing

ADMISSIONS POLICIES SOURCE

Institution

School Policies

*Program**

School Policies

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

PRESBYTERIAN HOSPITAL SCHOOL OF NURSING
Post Office Box 10157
Charlotte, N. C. 28237

*TITLE OF PERSON TO BE
CONTACTED*

Director, School of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog and Brochure

*Program**

Catalog and Brochure

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Individual Basis

*Eligibility for Special
Examination*

Students in Former Nursing School Program
with Required Academic Standards

Written Examination

National League for Nursing

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WATTS HOSPITAL SCHOOL OF NURSING
Post Office Box 156
Durham, N. C. 27705

*TITLE OF PERSON TO BE
CONTACTED*

Director of Nursing Education

ADMISSIONS POLICIES SOURCE

Institution

Watts Hospital School of Nursing

*Program**

CREDIT POLICIES FOR NURSING

Transfer of Credits

In Process

*Eligibility for Special
Examination*

Written Examination

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NURSING PROGRAMS LEADING TO
BACCALAUREATE DEGREE

NAME AND LOCATION

ATLANTIC CHRISTIAN COLLEGE
Wilson, N. C. 27893

*TITLE OF PERSON TO BE
CONTACTED*

Chairman, Department of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

No

*Eligibility for Special
Examination*

Registered Nurses and Those With Previous Experience
Who Have Completed Prerequisites for Nursing Major

Written Examination

Practical Demonstration

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

DUKE UNIVERSITY SCHOOL OF NURSING
Duke University Medical Center
Durham, N. C. 27710

*TITLE OF PERSON TO BE
CONTACTED*

Director of Academic Programs

ADMISSIONS POLICIES SOURCE

Institution

Duke University Bulletin

*Program**

Duke University Bulletin

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Comparable Baccalaureate Program

*Eligibility for Special
Examination*

Registered Nurses to Student Status

Written Examination

Departmental, School of Nursing

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

EAST CAROLINA UNIVERSITY
Post Office Box 2753
Greenville, N. C. 27834

TITLE OF PERSON TO BE
CONTACTED

Dean, School of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Undergraduate Catalog

*Program**

Undergraduate Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, For Comparable Nursing Courses

*Eligibility for Special
Examination*

Diploma, Associate Degree Nurses, Licensed
Practical Nurses, Nursing Assistants

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

LENOIR RHYNE COLLEGE
Post Office Box 292
Hickory, N. C. 28601

TITLE OF PERSON TO BE
CONTACTED

Chairman, Nursing Department

ADMISSIONS POLICIES SOURCE

Institution

Catalog and Chairman of Nursing Department

*Program**

Catalog, Nursing Major Upper Division

CREDIT POLICIES FOR NURSING

Transfer of Credits

Individual Basis

*Eligibility for Special
Examination*

Diploma and Associate Degree Programs, Individual
Basis From Another Baccalaureate Program

Written Examination

National League for Nursing and/or Departmental

Performance Evaluation

In Process of Being Planned

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

NORTH CAROLINA AGRICULTURAL AND TECHNICAL
STATE UNIVERSITY
Greensboro, N. C. 27411

TITLE OF PERSON TO BE
CONTACTED

Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes

*Eligibility for Special
Examination*

Diploma, Associate Degree Nurses and Those
Who Have Completed Prerequisites for Nursing Major

Written Examination

National League for Nursing, Departmental

Performance Evaluation

Practical Demonstration May Be Required

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

NORTH CAROLINA CENTRAL UNIVERSITY
Post Office Box 19798
Durham, N. C. 27707

*TITLE OF PERSON TO BE
CONTACTED*

Chairperson, Department of Nursing

ADMISSIONS POLICIES SOURCE

Institution

• Catalog

*Program**

Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

None

*Eligibility for Special
Examination*

Registered Nurses, Licensed Practical Nurses

Written Examination

Departmental, National League for Nursing

• *Performance Evaluation*

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL
School of Nursing - Carrington Hall
Chapel Hill, N. C. 27514

*TITLE OF PERSON TO BE
CONTACTED*

Office of Student Affairs

ADMISSIONS POLICIES SOURCE

Institution

Undergraduate Catalog

*Program**

See School of Nursing Catalog

CREDIT POLICIES FOR NURSING

Transfer of Credits

None

*Eligibility for Special
Examination*

Registered Nurses, Licensed Practical Nurses,
Medical Corpsmen, Previous Experience

Written Examination

Departmental

Performance Evaluation

Clinical Practicum

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE
UNCC College of Nursing
Charlotte, N. C. 28223

*TITLE OF PERSON TO BE
CONTACTED*

Office of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Undergraduate Catalog

*Program**

Unit of Chemistry and Biology

CREDIT POLICIES FOR NURSING

Transfer of Credits

Individual Basis

*Eligibility for Special
Examination*

Currently Enrolled in the College of Nursing

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

UNIVERSITY OF NORTH CAROLINA AT GREENSBORO
1000 Spring Garden Street
Greensboro, N. C. 27412

*TITLE OF PERSON TO BE
CONTACTED*

Director of Admissions

ADMISSIONS POLICIES SOURCE

Institution

Undergraduate Catalog

*Program**

Undergraduate Catalog, Nursing Major Upper Division

CREDIT POLICIES FOR NURSING

Transfer of Credits

None

*Eligibility for Special
Examination*

Licensed Registered Nurses and Those Who Have
Completed Prerequisites for Nursing Major

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WESTERN CAROLINA UNIVERSITY
Department of Nursing
Cullowhee, N. C. 28723

*TITLE OF PERSON TO BE
CONTACTED*

Head, Department of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

None

CREDIT POLICIES FOR NURSING

Transfer of Credits

None

*Eligibility for Special
Examination*

Registered Nurses

Written Examination

Departmental

Performance Evaluation

Practical Demonstration

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

NAME AND LOCATION

WINSTON-SALEM STATE UNIVERSITY
Post Office Box 13326
Winston-Salem, N. C.

*TITLE OF PERSON TO BE
CONTACTED*

Dean, School of Nursing

ADMISSIONS POLICIES SOURCE

Institution

Catalog

*Program**

None

CREDIT POLICIES FOR NURSING

Transfer of Credits

Yes, Associate Degree Graduates

*Eligibility for Special
Examination*

Licensed Practical Nurses, Registered Nurses

Written Examination

National League for Nursing

Performance Evaluation

*Includes any policies differing from general admissions policies of the institution for the nursing program, nursing major, or clinical nursing courses.

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APPENDIX

DATA FORM FOR STUDY COMMITTEE ON ADVANCED PLACEMENT IN NURSING EDUCATION

Name of Institution: _____

Title of Person to be Contacted: _____

Address: _____

Program	_____	Practical Nurse Education
	_____	Associate Degree
	_____	Diploma
	_____	Baccalaureate

I. Admissions Policies:

A. Institution (where information is to be found)

B. Nursing Program, Nursing Major, or Clinical Nursing Courses
(include any policies differing from the General Admissions
Policies)

II. Credit Policies:

A. Transfer credit for nursing courses. (If applicable, describe
in detail)

DATA FORM (Con't.)

B. Credit by written examination and/or performance assessment.

Eligibility (Who is permitted to take the test(s),
What qualifications are necessary, etc.)

Written Examination: (Type of examination: departmental
or standardized - specify NLN, etc.)

Performance Evaluation: (Describe)

Others: